00399R000100040072 REPORTS INVENTORY DDP - 137 PREPARE IN DUPLICATE 1. TITLE OF REPORT (if a fill-in report include Form No.) 2. TYPE X STATISTICAL 0F NARRATIVE REPORT RECEIPT OF EQUIPMENT REPORT MACHINE-NAME LISTING PERSONNEL TRAINING ADMIN. GENERAL LOGISTICS SECURITY OTHER (specify) 3. FUNCTIONAL AREA MEDICAL FINANCE TSD. 25X1 6. DISTRIBUTION (No. of components not number of copies) 4. NO. OF COPIES PREPARED 5. FREQUENCY (weekly, monthly, quarterly, etc.) Weekly 5 7. FORMAT (memorandum, form 8. ADP PROCESSING 9. DIRECTIVE AUTHORITY REQUIRING REPORT computer print-out, etc) IF YES GIVE ADP PROCESSING NO. YES 25X1 Statistical C/TSD/ NO 11. FEEDER REPORTS (State total number and identify by Title, 10. PREPARING COMPONENT (include lowest level contributing information to report) Form No., or nomenclature. Attach separate sheet if necessary.) C/TSD. N/A 12. COST FACTORS MANUAL PREPARATION AND REVIEW COSTS HOURLY HOURS PER COST PER TIMES GRADE X X COST PER YEAR RATE REPORT REPORT. PREPARED \$1,012.00 COSTS OF COMPUTER PRODUCED REPORTS TOTAL COSTS PER YEAR \$1,012.00 13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT. June 1962 to provide information receipt of TSD cognizant material from vendors for stock, return from repair, reprofit and/or modification. FUTURE GOALS ESTIMATED SAVINGS GOAL PROPOSED BY COMPONENT FOR THIS REPORT MAN-HOURS **DOLLARS** OTHER (explain) RETAIN AS IS CHANGE DISCONT INUE DATE OF INVENTORY 17. NAME AND TITLE OF PERSON FURNISHING INFORMATION
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